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no correlation between disease severity and leukocytosis value. Antibiotics administration remains an everyday practice of salmonellosis treatment in localized form.

Key words: Salmonellosis, acute diarrhea.

120. PSORIASIS, COMORBIDITIES, BIOLOGICAL THERAPY

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Introduction. Psoriasis is a chronic inflammatory systemic disease. Evidence shows an association of psoriasis with arthritis, depression, inflammatory bowel disease and cardiovascular diseases. Recently, several other comorbid conditions have been proposed as related to the chronic inflammatory status of psoriasis. The understanding of these conditions and their treatments will certainly lead to better management of the disease.

Purpose. Assessing the role of comorbidities in psoriasis and analysis of psycho-emotional status as a primary comorbidity in patients with psoriasis.

Material and methods. This study is a retrospective / prospective evaluation and based on analysis of historical data conducted on a group of patients with various forms of psoriasis and psoriatic arthritis. In the retrospective study entered 100 patients, on prospectively - 20 patients who were evaluated using Zung self-assessment Scale and Hamilton Depression Rating Scale.

Results. An analysis of the study gives the following results: 34% of patients had hypertension, 22% diabetes, 18% psoriatic arthritis, 14% liver injury, 5% obesity, 1% chronic obstructive pulmonary disease and 1% Crohn's disease. Zung self-assessment depression scale determined that 20% of patients surveyed showed minimal depression, 20% moderate depression, 10% severe depression and 50% had only signs of depression. According to the Hamilton self-assessment depression scale 50% had minimum depression, 40% had no depression, 10% had moderate depression, and no one showed signs of severe depression.

Conclusions. Evidence increasingly suggests that there is a relation between psoriasis and several comorbidities. Affected patients show higher mortality and hospitalization rates, which indicates the need for a multidisciplinary approach in the management of these patients.

Finally, the integral approach of psoriasis should include the identification of cardiovascular risk factors and metabolic diseases, the adaption of treatments to the existing comorbidities, as well as the evaluation of existing psychological/psychiatric disorders, in order to achieve a long-term control of the disease and improve the cumulative quality of life. Early and aggressive treatment of severe psoriasis, PsA and Associated comorbidities may influence the well-being and probably the longevity of patients.